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Application Number

## CORRESPONDENCE ADDRESS Filing Date Application mark Honore Shellans First Named Inventor 2612 Art Unit Address to: Commissioner for Patents Holloway III, Edwin C Examiner Name P.O. Box 1450 Alexandria, VA 22313-1450 PFD-0301 Attorney Docket Number Please change the Correspondence Address for the above-identified patent application to: The address associated with Customer Number: 25007 OR Individual Name Address City State Zip Country Telephone Email This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTQ/\$B/96), Attorney or agent of record. Registration Number 38170 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number Signature Typed or Printed Dale B. Halling Name Telephone 719-447-1990 Date 8/8/07 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below Total of forms are submitted.

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